CANCER FACTS

National Cancer Institute • National Institutes of Health

Questions and Answers About Finding Smoking Cessation Services

1. How important is it to stop smoking?

Cigarette smoking alone is responsible for approximately one-third of all cancer deaths each year and leads to \$50 billion in direct medical costs annually in the United States. It is the cause of 87 percent of all lung cancers. Numerous studies have shown that smoking is also associated with a person's risk of developing cancers of the larynx, pharynx, oral cavity, esophagus, bladder, kidney, pancreas, and cervix. The risk of developing cancer and other smoking-related diseases, including chronic lung disease and heart disease, increases with the number of cigarettes and length of time a person smokes. People who smoke and drink alcoholic beverages greatly increase their risk of cancers of the oral cavity, pharynx, esophagus, and larynx. Women who smoke during pregnancy increase their risk of several complications, including bleeding during pregnancy, delivering a premature baby, and having a low birth weight baby. Benefits of quitting include the following:

- About 10 years after quitting, the risk of lung cancer for the ex-smoker is 50 percent to 70 percent less than the risk for those who continue to smoke.
- Quitting reduces the risk of smoking-related diseases.
- Women who stop smoking before becoming pregnant or stop smoking in the first 3 months of pregnancy can reverse the risk of low birth weight for the baby and reduce other pregnancy-associated risks.

2. Can my doctor or dentist help me stop smoking?

Doctors and dentists can be good sources of information about the health risks of smoking and about quitting. They can tell their patients about the proper use and potential side effects of each type of nicotine replacement therapy and help them find local smoking cessation programs.

Doctors and dentists can also play an important role by *asking* patients about smoking at every office visit; *advising* patients to stop; *assisting* patients by setting a quit date, providing self-help materials, and suggesting nicotine replacement therapies (when appropriate); and *arranging* for followup visits.

3. What is the National Institutes of Health doing to help people stop smoking?

The National Institutes of Health (NIH), comprised of 25 Institutes and Centers in Bethesda, Maryland, is one of eight health agencies that is part of the U.S. Department of Health and Human Services. NIH supports research to help prevent, detect, diagnose, and treat diseases and disabilities. Smoking is a risk factor for a number of diseases and several of NIH's Institutes provide information on smoking cessation.

One of those Institutes is the National Cancer Institute (NCI), which conducts research on smoking cessation and works with other Government agencies and nonprofit organizations to promote programs that reduce the rate of illness and death associated with smoking. Several NCI publications provide tips on smoking cessation and dealing with secondhand smoke at work or in public places. These materials are available from the NCI–supported Cancer Information Service (CIS) at:

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1–800–4–CANCER (1–800–422–6237)
TTY (for deaf and hard of hearing callers): 1–800–332–8615
Web site: http://cis.nci.nih.gov/
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Another NIH Institute that provides help for people who want to stop smoking is the National Institute on Drug Abuse (NIDA). NIDA supports research on the health aspects of drug abuse and addiction, including the effects of cigarettes and other nicotine products. The NIDA Infofax service offers drug abuse and addiction information in English and Spanish. Users can receive fact sheets by fax or mail, or listen to recorded messages. NIDA Infofax is available at:

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1–888–NIH–NIDA (1–888–644–6432)
TTY (for deaf and hard of hearing callers): 1–888–TTY–NIDA (1–888–889–6432)
Web site: http://www.nida.nih.gov/
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NIDA publications can be ordered from the National Clearinghouse for Alcohol and Drug Information (NCADI) at:

Post Office Box 2345 Rockville, MD 20847–2345 1–800–729–6686 301–468–2600

TTY (for deaf and hard of hearing callers): 1–800–487–4889

Fax: 301–468–6433

Web site: http://www.health.org/

4. What other organizations can help people stop smoking?

A number of organizations provide information and materials about where to find help to stop smoking. State and local health agencies often have information about community smoking cessation programs. The local or county government section in the phone book (blue pages) has current phone numbers for health agencies. Information to help smokers who want to quit are readily available through community hospitals, the yellow pages (under "drug abuse and addiction"), public libraries, health maintenance organizations, health fairs, bookstores, and community helplines.

Several national organizations provide information about how to quit smoking:

Government:

• The Office on Smoking and Health of the Centers for Disease Control and Prevention distributes pamphlets, posters, scientific reports, and public service announcements about smoking, and maintains a bibliographic database of smoking and health-related materials. For more information, contact:

Office on Smoking and Health
National Center for Chronic Disease Prevention and Health Promotion
Centers for Disease Control and Prevention
Mailstop K–50, 4770 Buford Highway, NE.
Atlanta, GA 30341–3724
1–800–CDC–1311 (1–800–232–1311)
770–488–5705

Fax: 770-488-5393

FAX Information Service: 770–332–2552 Web site: http://www.cdc.gov/tobacco

E-mail: ccdinfo@cdc.gov

• The Agency for Healthcare Research and Quality (AHRQ) issues smoking cessation guidelines and other materials for physicians, health care professionals, and the general public. Printed copies are available by contacting:

AHRQ Publications Clearinghouse Post Office Box 8547 Silver Spring, MD 20907–8547 1–800–358–9295 410–381–3150

TTY (for deaf and hard of hearing callers): 1–888–586–6340

Web site: http://www.ahrq.gov/

E-mail: info@ahrq.gov

Nonprofit:

• The American Cancer Society (ACS) publishes a series of pamphlets with helpful tips and techniques for smokers who want to quit. The ACS also has information on nicotine addiction, publications outlining the health consequences of smoking, and the effects of secondhand smoke. In addition, ACS produces a bibliography of smoking and tobacco-related reading material, which includes books and audiotapes about how to quit smoking.

The ACS also sponsors a smoking cessation clinic called FreshStart, which is available in most of the United States. Areas that do not offer the FreshStart clinic will refer callers to other community resources. The program consists of four 1-hour sessions held over a 2-week period. The ACS recognizes that smoking is a chemical addiction, a habit, and a psychological dependency; FreshStart addresses all three issues. The FreshStart program also helps the new nonsmoker with potential obstacles, such as weight control and stress management. For more information, contact ACS's National Home Office at:

1599 Clifton Road, NE. Atlanta, GA 30329–4251 1–800–ACS–2345 (1–800–227–2345) Web site: http://www.cancer.org/

The white pages of the telephone book may have the phone number for the local ACS office. If a local number is not listed, you may call 1–800–ACS–2345 for assistance.

• The American Lung Association (ALA), an organization dedicated to fighting smoking-related diseases, provides information about local smoking cessation programs as well as its Freedom From Smoking clinics for individuals and organizations. The ALA produces a number of self-help manuals, audiotapes, and videos that accompany the Freedom From Smoking program. These materials

also address issues of concern to new nonsmokers, such as weight gain, coping strategies, and addiction and withdrawal. For more information, contact ALA's national headquarters at:

1740 Broadway New York, NY 10019–4274 1–800–LUNG–USA (1–800–586–4872) 212–315–8700 Web site: http://www.lungusa.org/

The white pages of the telephone book may have the phone number for a local ALA chapter. If a local number is not listed, the ALA office of the state from which the caller places the call can provide information at 1–800–LUNG–USA (1–800–586–4872). The ALA Web site has a number of resources, including an online Freedom From Smoking program.

 The American Heart Association (AHA) has information on local and community-related intervention programs in schools, workplaces, and health care sites. It also offers brochures on smoking cessation and the relationship between smoking and heart disease. For more information, contact AHA's national office at:

National Center 7272 Greenville Avenue Dallas, TX 75231 1–800–AHA–USA1 (1–800–242–8721) Web site: http://www.americanheart.org/

The white pages of the telephone book may have the phone number for a local AHA chapter. If a local number is not listed, the AHA office of the state from which the caller places the call can provide information at 1–800–AHA–USA1 (1–800–242–8721).

• Information about Nicotine Anonymous (NA), a 12-step program, can be obtained from:

Nicotine Anonymous World Services Post Office Box 126338 Harrisburg, PA 17112-6338 415-750-0328

Web site: http://www.nicotine-anonymous.org

E-mail: info@nicotine-anonymous.org

5. What is nicotine replacement therapy?

Nicotine replacement products deliver small, steady doses of nicotine into the body, which helps to relieve the withdrawal symptoms often felt by people trying to quit smoking. These products are available in four forms: patches, gum, nasal spray, and

inhaler. Researchers recommend combining nicotine replacement therapy with some type of advice or counseling from a doctor, dentist, pharmacist, or other health provider.

- The **nicotine patch**, which is available over the counter (without a prescription), supplies a steady amount of nicotine to the body through the skin. One type of nicotine patch is sold in a 15 milligram (mg) strength as a 6-week smoking cessation treatment. Another type of nicotine patch is sold in varying doses as part of an 8- to 10-week smoking cessation treatment. Nicotine doses are lowered as the treatment progresses. The nicotine patch may not be a good choice for people with skin problems or allergies to adhesive tape.
- **Nicotine gum** is available over the counter in 2- and 4-mg strengths. Chewing nicotine gum releases nicotine into the bloodstream through the lining of the mouth. Nicotine gum might not be appropriate for people with temporomandibular joint disease (TMJ) or for those with dentures or other dental work such as bridges.

Some studies have suggested that nicotine gum, in combination with nicotine patch therapy, reduces withdrawal symptoms better than either medication alone. When used in combination, the nicotine patch and nicotine gum also lead to much higher quit rates compared with nicotine gum alone.

- Nicotine nasal spray was approved by the U.S. Food and Drug Administration (FDA) in 1996 for use by prescription only. The spray comes in a pump bottle containing nicotine that smokers can inhale when they have an urge to smoke. In general, people should not use the nasal spray for longer than 6 months, as it is possible to become addicted to it. This product is not recommended for people with nasal or sinus conditions, allergies or asthma, nor is it recommended for young smokers.
- A **nicotine inhaler**, also available only by prescription, was approved by the FDA in 1997. This device delivers a vaporized form of nicotine to the mouth through a mouthpiece attached to a plastic cartridge. Even though it is called an inhaler, the device does not deliver nicotine to the lungs the way a cigarette does. Most of the nicotine only travels to the mouth and throat, where it is absorbed through the mucous membranes. Common side effects include throat and mouth irritation and coughing. Anyone with a bronchial problem such as asthma should use it with caution.

6. Is there a smoking cessation aid that does not contain nicotine?

Bupropion, which is available only by prescription, was approved by the FDA in 1997 to treat nicotine addiction. This drug can help to reduce nicotine withdrawal symptoms and the urge to smoke. Some common side effects of bupropion are dry mouth, difficulty sleeping, shakiness, and skin rash. People should not use this drug if they already have a seizure condition such as epilepsy or an eating disorder such as anorexia nervosa or bulimia, or if they are taking other medicines that contain bupropion hydrochloride. Bupropion is not recommended for women who are pregnant or breast feeding. Other medications that do not contain nicotine are being studied as potential smoking cessation aids.

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Sources of National Cancer Institute Information

Cancer Information Service

Toll-free: 1–800–4–CANCER (1–800–422–6237)

TTY (for deaf and hard of hearing callers): 1–800–332–8615

NCI Online

Internet

Use http://www.cancer.gov to reach NCI's Web site.

CancerMail Service

To obtain a contents list, send e-mail to cancermail@icicc.nci.nih.gov with the word "help" in the body of the message.

CancerFax® fax on demand service

Dial 301–402–5874 and listen to recorded instructions.

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